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maintenance ree notific	ations.		a) specifying a new c	correspo	ondence address; an	dor (b) indicating a sep	arate "FEE ADDRESS" for
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30565	7590 11/29	9/2010		have it			
Woodard, Emhardt, Moriarty, McNett & Henry LLP 111 Monument Circle, Suite 3700 Indianapolis, IN 46204-5137				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
		(Depositor's name					
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APPLICATION NO. FILING DATE		FIRST NAMED INVEN		TOR	ATTORNEY DOCKET NO. CONFIRM		CONFIRMATION NO.
10/551,399 08/08/2006			Brian C. Case		003006-001783		3287
TITLE OF INVENTION: PERCUTANEOUSLY DEPLOYED VASCULAR VALVES							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	OUE P	REV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1510	\$300		\$0	\$1810	02/28/2011
. EXAN	EXAMINER		CLASS-SUBCLASS	3			
SHARMA, YASHITA		3774	623-001240				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Woodard, Emhardt, Moriarty, McNett & Henry LLP				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Cook Incorporated  Bloomington, Indiana  Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted:  Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-3030 (enclose an extra copy of this form).				
	tus (from status indicated as SMALL ENTITY state		☐ b. Applicant is no	longer	claiming SMALL I	ENTITY status. See 37 C	FR 1.27(g)(2).
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Typed or printed nam	Registration No. 51,203						
,	10 1 100.					public which is to file (and tes to complete, including tents on the amount of the demark Office, U.S. Depo END TO: Commissioner	I by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Palents, P.O. Box 1450, number.